GENERAL INFORMATION

The Spartan Family Plan provides an incentive to students with immediate family members enrolled at the University who are seeking an affordable, high-quality education. If awarded, an adjustment to the final balance of a student’s cost of attendance will be made. Award amounts will be determined based upon need and after an administrative review of the application and students’ records.

Application Requirements

1) Applicants must sign, date, and complete the application in its entirety. One application is required per family, per semester.

2) A minimum of two immediate family members (e.g., mother, father, brother, sister, spouse) must be currently enrolled or plan to enroll for the semester in which a tuition reduction is requested. The Office of the Vice President for Student Affairs may request additional information for verification if necessary.

3) Currently enrolled students must meet Satisfactory Academic Progress (SAP) and be in good academic standing with a cumulative & semester GPA of 2.0 or better for undergraduate students and 3.0 for graduate students.

4) Should an eligible family member drop all classes or withdraw from Norfolk State University during the term, the remaining student will become ineligible, and an account adjustment may be necessary.

5) If awarded, funds can only be applied to tuition and fee charges. Funds may not be used in addition to existing award types that only cover tuition and fees.

6) The application deadline for Fall is August 1st, and the Spring deadline is December 1st.

All correspondence regarding eligibility will be sent via NSU email.

Submit Electronically

or

Return to:
Norfolk State University
Student Affairs
Student Services Center, Suite 301
700 Park Avenue
Norfolk, VA 23504

Email: dmfulgham@nsu.edu
Telephone: 757-823-8141

I understand the application requirements, and should I be eligible, agree to abide by and support the rules and regulations as set forth by the University.

Applicant’s Signature: ___________________________ Date: ___________________

Applicant’s Signature: ___________________________ Date: ___________________
SPARTAN FAMILY PLAN
APPLICATION
2021- 2022
(Please Print or Type)

Date: ________________________

Student 1

1. Full Name: ___________________________ ___________________________ ___________________________ ___________________________
   Last     First  MI

2. NSU Student ID: ___________________________ Telephone Number: ___________________________

3. Address: ___________________________ ___________________________ ___________________________ ___________________________
   Street Address     City     State     Zip Code

4. NSU Email Address: ___________________________ Date of Entry to NSU: ___________________________
   Major/Anticipated Graduation Date: __________________________________________________________

5. Relationship to Student 2: __________________________________________________________

Student 2

1. Full Name: ___________________________ ___________________________ ___________________________ ___________________________
   Last     First  MI

2. NSU Student ID: ___________________________ Telephone Number: ___________________________

3. Address: ___________________________ ___________________________ ___________________________ ___________________________
   Street Address     City     State     Zip Code

4. NSU Email Address: ___________________________ Date of Entry to NSU: ___________________________
   Major/Anticipated Graduation Date: __________________________________________________________

5. Relationship to Student 1: __________________________________________________________

I certify that the above statements are true and correct to the best of my knowledge, and should I be eligible, I agree to abide by and support the rules and regulations as set forth by the University.

Applicant’s Signature: ___________________________ Date: ___________________________

Applicant’s Signature: ___________________________ Date: ___________________________

Revised February 2020